

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | MM | 572 | 07-05-01 |
| RESPONSE FORMALITY REVIEW | HL | 712 | 10-30-01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------|----------|
| Final | |
| Original | |
| 1 | 12-22-02 |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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ms 12/22/02